

12/23/99



JC68

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19-27-99

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

Only for new nonprovisional applications under 37 C.F.R. § 1. 53(b)

Attorney Docket No. AMED 056

First Inventor or Application Identifier Walid Aboul-Hosn, et al

Title Apparatus and Methods For Entering Cavities Of The Body

Express Mail Label No. EL514049356US

PTO

09/470697

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Specification [Total Pages 38]

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. Drawing(s) (35U.S.C. 113) [Total Sheets 15]

4. Oath or Declaration [Total Pages 53]

- a. Newly executed (original or copy)
- b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - 1. **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

• NOTE FOR ITEMS 12 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27). EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington DC 20231

5. Microfiche Computer Program (Appendix)

6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. Computer Readable Copy
- b. Paper Copy (identical to computer copy)
- c. Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))

8. 37 C.F.R. § 3.73(b) Statement Power of
(when there is an assignee) Attorney

9. English Translation Document (if applicable)

10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS
Citations

11. Preliminary Amendment

12. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

- Small Entity

13. Statement(s) Statement filed in prior application,
(PTO/SB/09-12) Status still proper and desired

14. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

15. Other: _____

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment-

Continuation Divisional Continuation-in-part (CIP) of prior application No: 09 / 099,713

Prior application Information - Examiner Bianco, Patricia Group I Art Unit- 3762

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS Customer Number or Bar Code Labelor Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	A-MED SYSTEMS, INC.			
	attn: Intellectual Property			
Address	2491 Boatman Avenue			
City	West Sacramento	State	California	Zip Code
Country	USA	Telephone	916-375-7400	Fax 916-375-7444

Name (Print/Type)	Jonathan Spangler	Registration No (Attorney/Agent)	40,182
Signature	Date 12/23/1999		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN		Docket Number (Optional) AMED 056
<p>Applicant, Patentee, or Identifier: <u>Walid Aboul-Hosn, et al</u></p> <p>Application or Patent No.: Enclosed herein</p> <p>Filed or issued: <u>12/23/1999</u></p> <p>Title: <u>Apparatus and Methods For Entering Cavities Of The Body</u></p>		
<p>I hereby state that I am</p> <p><input type="checkbox"/> the owner of the small business concern identified below:</p> <p><input checked="" type="checkbox"/> an official of the small business concern empowered to act on behalf of the concern identified below-</p>		
<p>NAME OF SMALL BUSINESS CONCERN <u>A-MED SYSTEMS, INC.</u></p>		
<p>ADDRESS OF SMALL BUSINESS CONCERN <u>2491 Boatman Avenue</u> <u>West Sacramento, CA 95691</u></p>		
<p>I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20416.</p>		
<p>I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in</p>		
<p><input checked="" type="checkbox"/> the specification filed herewith with title as listed above.</p> <p><input type="checkbox"/> the application identified above.</p> <p><input type="checkbox"/> the patent identified above.</p>		
<p>If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).</p>		
<p>Each person, concern, or organization having any rights in the invention is listed below~</p>		
<p><input checked="" type="checkbox"/> no such person, concern, or organization exists.</p> <p><input type="checkbox"/> each such person, concern, or organization is listed below.</p>		
<p>Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)</p>		
<p>I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))</p>		
<p>NAME OF PERSON SIGNING <u>John Gonzales</u></p>		
<p>TITLE OF PERSON IF OTHER THAN OWNER <u>Vice President Finance</u></p>		
<p>ADDRESS OF PERSON SIGNING <u>2491 Boatman Avenue, West Sacramento, CA 95691</u></p>		
SIGNATURE <u>John Gonzales</u>	DATE <u>12/23/1999</u>	

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Certificate of Mailing under 37 C.F.R. § 1.10.

JC675 U.S. PTO
09/470697
12/23/99



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Date of Deposit 12/23/99

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington D.C. 20231.

Kelly McCrystle

(typed name of person mailing paper or fee)

Kelly McCrystle
(signature of person mailing paper or fee)

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FEE TRANSMITTAL

for FY 1999

Patent fees are *subject to* annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 380.00)

Complete if Known

Application Number	
Filing Date	December 23, 1999
First Named Inventor	Walid Aboul-Hosn, et al
Examiner Name	
Group /Art Unit	
Attorney Docket No.	AMED 056

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																		
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ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td></td> <td></td> </tr> <tr> <td>105 130 205 65</td> <td>Surcharge - late filing fee or oath</td> <td></td> <td></td> </tr> <tr> <td>127 50 227 25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> <td></td> </tr> <tr> <td>139 130 139 130</td> <td>Non-English specification</td> <td></td> <td></td> </tr> <tr> <td>147 2,520 147 2,520</td> <td>For filing a request for reexamination</td> <td></td> <td></td> </tr> <tr> <td>112 920* 112 920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> <td></td> </tr> <tr> <td>113 1,840* 113 1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> <td></td> </tr> <tr> <td>115 110 215 55</td> <td>Extension for reply within first month</td> <td></td> <td></td> </tr> <tr> <td>116 380 216 190</td> <td>Extension for reply within second month</td> <td></td> <td></td> </tr> <tr> <td>117 870 217 435</td> <td>Extension for reply within third month</td> <td></td> <td></td> </tr> <tr> <td>118 1,360 218 680</td> <td>Extension for reply within fourth month</td> <td></td> <td></td> </tr> <tr> <td>128 1,850 228 925</td> <td>Extension for reply within fifth month</td> <td></td> <td></td> </tr> <tr> <td>119 300 219 150</td> <td>Notice of Appeal</td> <td></td> <td></td> </tr> <tr> <td>120 300220 150</td> <td>Filing a brief in support of an appeal</td> <td></td> <td></td> </tr> <tr> <td>121 260 221 130</td> <td>Request for oral hearing</td> <td></td> <td></td> </tr> <tr> <td>138 1,510 1381,510</td> <td>Petition to institute a public use proceeding</td> <td></td> <td></td> </tr> <tr> <td>140 110 240 55</td> <td>Petition to revive - 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SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Jonathan Spangler	Registration No. (Attorney/Agent)	40,182	Telephone	916-375-7400X301
Signature		Date	Dec. 22, 1998		

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